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## BIB DATA SHEET

CONFIRMATION NO. 8813

<b>SERIAL NUMBER</b> 10/593,171	<b>FILING or 371(c) DATE</b> 07/21/2008 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> 23719		
<b>APPLICANTS</b> Walter Sarstedt, Numbrecht, GERMANY; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DE2005/000180 02/04/2005 <b>** FOREIGN APPLICATIONS *****</b> GERMANY 10 2004 013 379.4 03/17/2004 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 07/31/2008						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/JOHN PANI/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 4 2	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> KF ROSS PC 311 East York Street Savannah, GA 31401 UNITED STATES						
<b>TITLE</b> Blood-Collection Device for Newborn Babies and Infants						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			